

1001 WATER STREET, STE. A-100 KERRVILLE, TX 78028 TEL 830.896.5200 FAX 830.896.5202

June 30, 2014

Filed via ECFS

Marlene H. Dortch, Secretary Federal Communication Commission Office of the Secretary 445 12th Street, SW Washington, DC 20554

Re: WC D

WC Docket Nos. 14-58 and 11-42, Annual Report Pursuant to 47 C.F.R. §54.313 and

54.422. Form 481 - Carrier Annual Reporting Data Collection

Dear Ms. Dortch:

On behalf of Cutter Communications, Inc. d/b/a GCEC Telecom ("GCEC Telecom" or "the Company"), GVNW Consulting, Inc. hereby submits this FCC Form 481 – Carrier Annual Reporting Data Collection Form in compliance with sections 54.313 and 54.422 of the Commission's rules. GCEC Telecom is a competitive local exchange carrier designated as a CETC by the Public Utility Commission of Texas ("PUC"). The Company has also made this filing with the Universal Service Administrative Company ("USAC") and with the PUC of Texas.

If you have any questions, please contact me at sgatto@gvnw.com or 830-895-7226.

Stephen Gatto

Consultant

Sincer

GVNW Consulting, Inc.

Sincerely,

Enclosures

| FCC Fo | rm 481 - Carrier Annual Reporting Data Collection Form | FCC Form 481 OMB Control No. 3960-0986/OMB Control No. 3960-9819 July 2013 |
|----------------|---|--|
| <010> | Study Area Code | 449012 |
| <015> | Study Area Name | CUTTER COMMUNICATIONS INC DBA GCEC TECHNOLOGIES |
| <020> | Program Year | 2015 |
| <030> | Contact Name: Person USAC should contact with questions about this data | Chris Offill. |
| <035> | Contact Telephone Number: Number of the person Identified in data line <030> | 9034827159 ext. |
| <039> | Contact Email Address: Email of the person identified in data line <030> | chris.offill@gcsotelecom.com |
| ANNUA | L REPORTING FOR ALL CARRIERS | 54.313 54.422 Completion Completion Required - Required (check box when complete) |
| <100> | Service Quality Improvement Reporting | (complete attached worksheet) |
| <200> | Outage Reporting (voice) | (complete attached worksheet) |
| <210> | | outages to report |
| <300> | Unfulfilled Service Requests (voice) 0 | |
| <310> | Detall on Attempts (voice) | MINI |
| | | (attach descriptive document) |
| <320> | Unfulfilled Service Requests (broadband) | · Mills |
| <33U> | Detail on Attempts (broadband) | |
| 13302 | | (attach descriptive document) |
| | | And the second s |
| <400> <410> | Number of Complaints per 1,000 customer's (voice) Fixed 0.0 | |
| <420> | Mobile 0.0 | |
| <430> | Number of Complaints per 1,000 customers (broadb | and) |
| <440> <450> | Fixed 0.0 Mobile 0.0 | |
| <500> | Service Quality Standards & Consumer Protection Ru | iles Compliance (check to Indicate certification) |
| | 449012tx510.pdf . | |
| <510> | | (attached descriptive document) |
| | | |
| <600> | Functionality in Emergency Situations | (check to indicate certification) |
| | | (attoched descriptive document) |
| <610> | | |
| | | |
| | Company Price Offerings (voice) Company Price Offerings (broadband) | (complete attoched worksheet) |
| | Operating Companies and Affiliates | (complete attached worksheet) (complete attached worksheet) |
| | Tribal Land Offerings (Y/N)? | (If yes, complete attached worksheet) |
| | Voice Services Rate Comparability | (check to Indicate certification) |
| | | |
| <1010> | | (altach descriptive document) |
| | | |
| <1100> | Terrestrial Backhaul (Y/N)? | (If not, check to Indicate certification) |
| <1110> | | (complete attached worksheet) |
| | Terms and Condition for Lifeline Customers | (complete attached worksheet) |
| - 1 | Price Cap Carriers, Proceed to Price Cap Additional D | The state of the s |
| 2000> | Including Rate-of-Return Carriers affiliated with Pric | e Cap Local Exchange Carriers (check to Indicate certification) |
| 2005> | · · · · · · · · · · · · · · · · · · · | (complete attached worksheet) |
| 1 | Rate of Return Carriers, Proceed to ROR Additional D | TO THE RESIDENCE OF STREET |
| 3000> | | (check to indicate certification) |
| 3005> | | (complete attached worksheet) |

| about the . Zell | rvice Quality improvement Reporting llection Form | FCC Form 481 OMB Control No. 3060-0985/OMB Control No. 3060-0819 July 2013 |
|------------------|--|--|
| <010> | Study Area Code | 449012 |
| <015> | Study Area Name | CUTTER COMMUNICATIONS INC DRA GCRC TECHNOLOGIES |
| <020> | Program Year | 2015 |
| <030> | Contact Name - Person USAC should contact regarding this data | Chris Offill |
| <035> | Contact Telephone Number - Number of person Identified in data line <030> | 9034827159 ext. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | chris.offill@gcectelecom.com |
| <110> | Has your company received its ETC certification from the FCC? | (yes/no) O O |
| <111> | If your answer to Line <110> is yes, do you have an existing §54.202(a) "5 year plan" filed with the FCC? | (yes/no) O O |
| 351 | If your answer to Line <111> is yes, then you are required to file a progress report, on line <112> delineating the status of your company's existing § 54.202(a) "5 year plan" on file with the FCC, as it relates to your provision of voice telephony service. | 11 20 20 20 20 20 20 20 20 20 20 20 20 20 |
| <112> | Attach Five-Year Service Quality Improvement Plan or, in subsequent years, your annual progress report filed pursuant to 47 C.F.R. § 54.313(a)(1). If your c CETC which only receives frozen support, your progress report is only | company is a |
| 2 | required to address voice telephony service. | |
| | | Name of Attached Document |
| | Please check these boxes below to confirm that the attached documents(s), on line 112, contains a progress report on its five-year service quality improvement plan pursuant to § 54.202(a). The information shall be submitted at the wire center level or census block as appropriate. | |
| <113> | Maps detailing progress towards meeting plan targets | |
| <114> | Report how much universal service (USF) support was received | |
| <115> | How (USF) was used to improve service quality | |
| <116> | How (USF)was used to improve service coverage | |
| <117> | How (USF) was used to improve service capacity | |
| <118> | Provide an explanation of network improvement targets not met in the prior calendar year. | |

| (200) Service Outage Reporting (Voice) Data Collection Form | FCC Form 481 - OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013 |
|--|--|
| | |

| <010> | Study Area Code | 449012 |
|-------|---|---|
| <015> | Study Area Name | CUTTER COMMUNICATIONS INC DBA GCEC TECHNOLOGIES |
| <020> | Program Year | 2015 |
| <030> | Contact Name - Person USAC should contact regarding this data | Chris Offill |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 9034827159 ext. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | chris.offill@gcectelecom.com |

| | <2> | <b1></b1> | <b2></b2> | <b3></b3> | <b4></b4> | <<1> | <c2></c2> | <d></d> | <e></e> | < | <8> | <h></h> |
|-----|-----------------------------|----------------------|----------------------|--------------------|--------------------|---------------------------------|------------------------------|--|---|---|------------------------------|----------------------------|
| | NORS Reference Number | Outage Start Date | Outage Start Time | Outage End Date | Outage End Time | Number of Customers Affected | Total Number of Customers | 911 Facilities Affected (Yes / No) | Service Outage Description (Check all that apply) | Did This Outage Affect Multiple Study Areas (Yes / No) | Service Outage Resolution | Preventative Procedures |
| 1 | · | - | | | | | | | | | | |
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| Data Coll | ce Offerings including Voice Rate Data ection Form | FCC Form 481. OMB Control No. 3060-0986/OMB Control No. 3060-0819 |
|-------------|---|--|
| 学为关系 | | July 2013 |
| <010> | Study Area Code | 445012 |
| <015> | Study Area Name | CUTTER COMMUNICATIONS INC DBA GCBC TECHNOLOGIES |
| <020> | Program Year | 2015 |
| <030> | Contact Name - Person USAC should contact regarding this data | Chris Offill |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 9034827159 ext. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | chris.offill@gcectelecom.com |
| <701> | Residential Local Service Charge Effective Date 1/1/2014 | |
| <702> | Single State-wide Residential Local Service Charge | |

| State | Exchange (ILEC) | SAC (CETC) | Rate Type | Residential Local Service Rate | State Subscriber Line Charge | State Universal Service Fee | Mandatory Extended Area Service Charge | Total per line Rates and Fe |
|-------|-----------------|------------|-----------|--------------------------------|------------------------------|-----------------------------|---|--|
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| <010> | Study Area Code | 449012 |
|-------|--|---|
| <015> | Study Area Name | CUTTER COMMUNICATIONS INC DBA GCEC TECHNOLOGIES |
| <020> | Program Year | 2015 |
| <030> | Contact Name - Person USAC should contact regarding this data | Chris Offill |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 9034827159 ext. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> '. | chris.offill@ggectelecom.com |

| | State . | | Exchange (ILEC) | Residential Rate | State Regulated Fees | Total Rate and Fees | Broadband Service - Download Speed (Mbps) | Broadband Service - Upload Speed (Mbps) | Usage Allowance (GB) | Usage Allowance Action Taken When Limit Reached (selec |
|---|-----------|---|-----------------|------------------|-------------------------|---------------------|---|--|-------------------------|--|
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| (800) Opi Data Coll | erating Companies ection Form | | | FCCForm 481, a v CMBr.Control (No. 13060-0988/OMB Control No. 13060-0819 July 2013 |
|------------------------|--|--------------------|--|--|
| <010> | Study Arez Code | 449012 | | , |
| <015> | Study Area Name | COMMON COMMON | VICATIONS INC DBA GCEN | O WINDOLOGIES |
| <020> | Program Year | 2015 | TWEITYNG INC DER MED | A TRAINIVARY AND |
| <030> | Contact Name - Person USAC should contact regarding this data | Chris Offill | | |
| <035> | Contact Telephone Number - Number of person identified in data line <03 | | xt. | |
| <039> | Contact Email Address - Email Address of person identified in data line <0 | 30> chris.offill | #gcectelecom.com ` | |
| <810> | Reporting Carrier Cutter Communications, Inc. d/b/a GCEC | Telecom | | |
| <811> | Holding Company Grayson Collin Electric Cooperative | | | |
| <81.2> | Operating Company Cutter Communications, Inc. d/b/a GCEC | Telecom | | |
| <813> | خلف المحادث | yes to produce the | | - S-33 |
| | Affiliates | | SAC | Doing Business As Company or Brand Designation |
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| | Study Area Code | 449012 |
|---|--|---|
| <015> | Study Area Name | COTTER COMMUNICATIONS INC DBA GCEC TECRNOLOGIES |
| <020> | Program Year | 2015 |
| <030> | Contact Name - Person USAC should contact regarding this data | Chris Offill |
| <035> | Contact Telephone Number - Number of person identified in data line <030 | |
| <039> | Contact Email Address - Email Address of person identified in data line <03 | O> chris.offill@gcectelecom.com |
| <910> | Tribal Land(s) on which ETC Serves | |
| | | |
| ű. | | |
| <920> | Tribal Government Engagement Obligation | , 4 |
| | | - |
| | | |
| į. | , · · · · · · · · · · · · · · · · · · · | Name of Attached Document |
| 8 | | Name of Attached Document |
| | company serves Tribal lands, please select (Yes, No, NA) for each these boxes | Name of Attached Document |
| to con | firm the status described on the attached document(s), on line 920, | |
| to con demor | firm the status described on the attached document(s), on line 920, strates coordination with the Tribal government pursuant to | Select |
| to con demor | firm the status described on the attached document(s), on line 920, | Select (Yes,No, |
| to con demor | firm the status described on the attached document(s), on line 920, estrates coordination with the Tribal government pursuant to 1.3(a)(9) includes: | Select |
| to con demon § 54.3 | firm the status described on the attached document(s), on line 920, istrates coordination with the Tribal government pursuant to 13(a)(9) includes: Needs assessment and deployment planning with a focus on Tribal | Select (Yes,No, NA) |
| to con demon § 54.3 | irm the status described on the attached document(s), on line 920, estrates coordination with the Tribal government pursuant to 13(a)(9) includes: Needs assessment and deployment planning with a focus on Tribal community anchor institutions. | Select (Yes,No, |
| to con demor § 54.3: <921> | irm the status described on the attached document(s), on line 920, estrates coordination with the Tribal government pursuant to 13(a)(9) includes: Needs assessment and deployment planning with a focus on Tribal community anchor institutions. Feasibility and sustainability planning; | Select (Yes,No, NA) |
| to condemon § 54.3. | irm the status described on the attached document(s), on line 920, estrates coordination with the Tribal government pursuant to 13(a)(9) includes: Needs assessment and deployment planning with a focus on Tribal community anchor institutions. Feasibility and sustainability planning; Marketing services in a culturally sensitive manner; | Select (Yes,No, NA) |
| to condemon § 54.3. <921> <922> <923> <924> | irm the status described on the attached document(s), on line 920, estrates coordination with the Tribal government pursuant to L3(a)(9) includes: Needs assessment and deployment planning with a focus on Tribal community anchor institutions. Feasibility and sustainability planning; Marketing services in a culturally sensitive manner; Compliance with Rights of way processes | Select (Yes,No, NA) |
| to con demor § 54.3. <921> <922> <923> <924> <925> | irm the status described on the attached document(s), on line 920, strates coordination with the Tribal government pursuant to L3(a)(9) includes: Needs assessment and deployment planning with a focus on Tribal community anchor institutions. Feasibility and sustainability planning; Marketing services in a culturally sensitive manner; Compliance with Rights of way processes Compliance with Land Use permitting requirements | Select (Yes,No, NA) |
| to con demor § 54.3. <921> <922> <922> <924> <925> <926> | irm the status described on the attached document(s), on line 920, strates coordination with the Tribal government pursuant to L3(a)(9) includes: Needs assessment and deployment planning with a focus on Tribal community anchor institutions. Feasibility and sustainability planning; Marketing services in a culturally sensitive manner; Compliance with Rights of way processes Compliance with Land Use permitting requirements Compliance with Facilities Siting rules | Select (Yes,No, NA) |
| to con demor § 54.3. <921> <922> <923> <924> <925> | istrates coordination with the Tribal government pursuant to (13(a)(9) includes: Needs assessment and deployment planning with a focus on Tribal community anchor institutions. Feasibility and sustainability planning; Marketing services in a culturally sensitive manner; Compliance with Rights of way processes Compliance with Land Use permitting requirements Compliance with Facilities Siting rules Compliance with Environmental Review processes | Select (Yes,No, NA) |

| WW. 15 4 45 Lit. | o Terrestrial Backhaul Reporting Jection Form | FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013 |
|------------------|---|--|
| <010> | Study Area Code | 449012 |
| <015> | Study Area Name | CUTTER COMMUNICATIONS INC DBA GCEC TECHNOLOGIES |
| <020> | Program Year | 2015 |
| <030> | Contact Name - Person USAC should contact regarding this data | Chris Offill |
| <035> | Contact Telephone Number - Number of person identified in data line <030 | > 9034827159 mxt. |
| <039> | Contact Email Address - Email Address of person identified in data line <030 | > chris.offill@geechelecom.com |
| <1120> | Please check this box to confirm no terrestrial backhaul options exist within the supported area pursuant to § 54.313(G) | |
| | | |
| <1130> | Please check this box to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 kbps upstream within the supported area pursuant to § 54.313(G) | |

| Data Coll | ection Form | | FCC Form 481 (** OMB Control No. 3060-0986/OMB Control No. 3060-0819) July 2013 |
|-----------|---|-------|---|
| <010> | Study Area Code | | 449012 |
| <015> | Study Area Name | | COTTER COMMUNICATIONS INC DNA GCEC TECHNOLOGIES |
| <020> | Program Year | | 2015 |
| <030> | Contact Name - Person USAC should contact regarding this data | 1 | Chris Offill |
| <035> | Contact Telephone Number - Number of person identified in data line | <030> | 9034827159 ext. |
| <039> | Contact Email Address - Email Address of person identified in data line | <030> | chris.offill@goectelecom.com |
| <1210> | Terms & Conditions of Voice Telephony Lifeline Plans | 4 | 445012tx1210.pdf |
| | | L | Name of Attached Document |
| <1220> | Link to Public Website | TTP | |
| or the we | theck these boxes below to confirm that the attached document(s), on line 121 absite listed, on line 1220, contains the required information pursuant to (a)(2) annual reporting for ETCs receiving low-income support, carriers must report: | 0, | |
| <1221> | Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers, | V | |
| <1222> | Details on the number of minutes provided as part of the plan, | V | |
| | | | |

| 2000) Pr | ce Cap Carrier Additional Documentation | FCC Form 481 a |
|--------------------------|--|--|
| The second second second | ection Form Rate-of Return Carriers affiliated with Price Cap Local Exchange Carriers | OMB Control No. 3060-0986/ОМВ Control No. 3060-0819 buy2013 |
| eromende. | | |
| <010> | Study Area Code | 449012 |
| <015> | Study Area Name | COTTER COMMUNICATIONS INC DBA GCSC TECHNOLOGIES |
| <020> | Program Year | 2015 |
| <030> | Contact Name - Person USAC should contact regarding this data | Chris Offill |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 9034827159 ext. |
| <039> | Contact Email Address - Email Address of person Identified in data line <030> | chris.offill@grectelegos.com |
| | | |
| | | |
| CHECK th | he boxes below to note compliance as a recipient of Incremental Connect Amer | rica Phase I support, frozen High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II |
| | 그 가장 보고 가장 하다 하다 가장 하다 하는 경기에 살아가 되었다면 가장 가장 하는 것이 없는 것이 없다면 없다고 있다. 그런 것이 없는 것이 없다면 | (e) the information reported on this form and in the documents attached below is accurate. |
| | | |
| | The state of the s | |
| | Incremental Connect America Phase I reporting | |
| <2010> | 2nd Year Certification (47 CFR § 54.313(b)(1)) | |
| <2011> | 3rd Year Certification (47 CFR § 54.313(b)(2)) | |
| 4.02.0 | ora ran an anadon (4) and 3 parameter (4) | lemand . |
| | Price Cap Carrier Receiving Frozen Support Certification (47 CFR § 54.312(a)) | |
| <2012> | 2013 Frozen Support Certification | |
| <2013> | 2014 Frozen Support Certification | |
| <2014> | 2015 Frozen Support Certification | - |
| <2015> | 2016 and future Frozen Support Certification | |
| | | |
| | Price Cap Carrier Connect America ICC Support (47 CFR § 54.313(d)) | |
| <2015> | Certification Support Used to Build Broadband | |
| | | |
| | Connect America Phase II Reporting (47 CFR § 54.313(e)) | |
| <2017> | 3rd year Broadband Service Certification | |
| <2018> | 5th year Broadband Service Certification | <u></u> |
| <2019> | Interim Progress Certification | |
| <2020> | Please check the box to confirm that the attached document(s), on | line 2021, contains the required information |
| 20202 | pursuant to § 54.313 (e)(3)(ii), as a recipient of CAF Phase II suppor addresses of community anchor institutions to which began provid | rt shall provide the number, names, and |
| | addresses of community anchor institutions to which began provid | ing access to broadband service in the |
| | preceding calendar year. | 3 |
| | | |
| | e " | |
| | (t) | |
| <2021> | Interim Progress Community Anchor Institutions | |
| | | |
| | | |
| | | |
| | | Name of Attached Document Listing Required Information |

| 1000 | te Di Retorn Carrier Additional Documentation | FEC Form 481 70 70 FEC POSSE/ OMB Control No. 3050-0819 |
|------------|--|--|
| usta tolli | ection Form | 20ty 2013 |
| <010> | Study Area Code | 449012 |
| <01.5> | Study Area Name | COTTER COMMUNICATIONS INC DBA GCEC TECHNOLOGIES |
| <020> | Program Year | 2015 |
| <030> | Contact Name - Person USAC should contact regarding this data Contact Telephone Number - Number of person identified in data line <030> | Chris Offill 9034827/59 ext. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | chris.offill@ccectelscom.com |
| | the street terminal to include the entire street that the street of the forest standard street and the street of the | |
| CHECK | | at to 47 CFR § 54.202(a)] and, for privately held carriers, ensuring compliance with the financial reporting requirements set forth in 47 reinformation reported on this form and in the documents attached below is accurate. |
| | | |
| | Progress Report on 5 Year Plan | |
| (3010) | Milestone Certification (47 CFR § 54.313(f)(1)(f)) | |
| | | Name of Attached Document Listing Required Information |
| 400 | Planes should this have to accome that the attention does according to the | |
| | Please check this box to confirm that the attached document(s), on line 3 § 54,313 (f)(1)(ii), the carrier shall provide the number, names, and addn providing access to broadband service in the preceding calendar year. | |
| | | |
| | 3 | |
| (3012) | Community Anchor Institutions (47 CFR § 54.313(f)(1)(ii)) | |
| | | Name of Attached Document Listing Required Information |
| (3013) | Is your company a Privately Held ROR Carrier (47 CFR § 54.313(f)(2)) | · (Yas/No) |
| (3014) | If yes, does your company file the RUS annual report | (Yes/No) |
| Dianea | | 7 contains the resident information numerical to \$ 54.242(9/2) constitues requires |
| | : 1 1 전 : | 7, contains the required information pursuant to § 54.313(f)(2) compliance requires: |
| (3015) | Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers) | |
| (3016) | Document(s) for Balance Sheet, Income Statement and Statement of Ca | ash Flows |
| | en de de de la composition de la composition de la composition de la production de la composition della composition de la composition della composition dell | |
| (3017) | if the response is yes on line 3014, attach your company's RUS annual report and all required documentation | |
| | | Name of Attached Document Listing Required Information |
| (3018) | If the response is no on line 3014, is your company audited? | (Yes/No) |
| | If the response is yes on line 3018, please check the boxes below to | منعاميد |
| | confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains | |
| (3019) | Either a copy of their audited financial statement; or (2) a financial report. In a f | format comparable to RUS Operating Report for Telecommunications |
| (3020) | Document(s) for Balance Sheet, Income Statement and Statement of C | Cash Flows |
| (3021) | Management letter issued by the independent certified public accountant that | performed the company's financial audit. |
| | If the response is no on line 3018, please check the boxes below to confirm your submission, on line 3026 pursuant to § 54.313(f)(2), contains: | |
| (3022) | Copy of their financial statement which has been subject to review by an independent certified public accountant or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications | |
| | Borrowers, | |
| (3023) | Underlying information subjected to a review by an independent certified public accountant | Η |
| (3024) | Underlying Information subjected to an officer certification. | } |
| (3025) | | ash Flows |
| | | (1 |
| (3026) | Attach the worksheet listing required information | |
| | l | Name of Attached Document Listing Required Information |

| Data Col | lon - Reporting Carrier Ection Form | FCC Form 481. OMB Control No: 3060-0986/OMB Control No: 3060-0819 July 2013 |
|----------|---|---|
| <010> | Study Area Code | 449012 |
| <015> | Study Area Name | CUTTER COMMUNICATIONS INC DBA GCEC TECHNOLOGIES |
| <020> | Program Year | 2015 |
| <030> | Contact Name - Person USAC should contact regarding this data | Chris Offill |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 9034827159 axt. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | chris.offill@gcactelecom.com |

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate. Name of Reporting Carrier: Signature of Authorized Officer: Date Printed name of Authorized Officer: Title or position of Authorized Officer: Telephone number of Authorized Officer: Study Area Code of Reporting Carrier: Filing Due Date for this form: Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

| · 中华 医内内内内 100000000000000000000000000000000 | iton - Agent / Carrier action Form | FCC Form 481 OM8 Control No. 3060-0985/OM8 Control No. 3060-0819 July 2013 |
|--|---|--|
| <010> | Study Area Code | 449012 |
| <0,15> | Study Area Name | CUTTER COMMUNICATIONS INC DBA GCEC TECHNOLOGIES |
| <020> | Program Year | 2015 |
| <030> | Contact Name - Person USAC should contact regarding this data | Chris Offill |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 9034827159 ext. |
| <039> | Contact Email Address - Email Address of person identified in data lino <030> | chris, offill@gcectelecum.com |

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

| | is authorized to submit the information reported on behalf of the reporting carrier. Lidde ensuring the accuracy of the annual data reporting requirements provided to the authorized authorized agent is accurate. |
|--|--|
| Name of Authorized Agent: Stephen Gatto | |
| Name of Reporting Carrier: CUTTER COMMUNICATIONS INC DBA GCEC TE | CHNOLOGIES |
| ignature of Authorized Officer: CERTIFIED ONLINE | Date: 06/30/2014 |
| rinted name of Authorized Officer: Chris Offill | |
| Title or position of Authorized Officer: CFO | |
| elephone number of Authorized Officer: 9034827159 ext. | |
| itudy Area Code of Reporting Carrier: 449012 | iling Due Date for this form: 07/01/2014 |

TO BE COMPLETED BY THE AUTHORIZED AGENT:

| Certification of Agent Authorized to File Annual Reports for CAF or LI Recipion | ients on Benait of Reporting Carrier . |
|---|--|
| i, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service suppo the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the informa | |
| Name of Reporting Carrier: CUTTER COMMUNICATIONS INC DBA GCBC TECHNOLOGIES | |
| dame of Authorized Agent or Employee of Agent: Stephen Gatto | |
| ignature of Authorized Agent or Employee of Agent: CERTIFIED ONLINE | Date: 06/30/2014 |
| rinted name of Authorized Agent or Employee of Agent: Stephan Gatto | Discourage of the second of th |
| Title or position of Authorized Agent or Employee of Agent Consultant | S |
| elephone number of Authorized Agent or Employee of Agent: 8308957226 ext. | ** ** |
| tudy Area Code of Reporting Carrier: 449012 Filing Due Date for this form: 07/01 | 1/2014 |

Attachments

| | | ±ulγ.2013 | | | | |
|-------|---|---|--|--|--|--|
| <010> | Study Area Code | 449012 | | | | |
| <015> | Study Area Name | COTTER COMMUNICATIONS INC DBA GCEC TECHNOLOGIES | | | | |
| <020> | Program Year | 2015 | | | | |
| <030> | Contact Name - Person USAC should contact regarding this data | Chris Offill | | | | |
| <035> | Contact Telephone Number - Number of person Identified in data line <030> | 9034827159 ext. | | | | |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | chris.offill@gcactelecom.com | | | | |
| <701> | Residential Local Service Charge Effective Date 1/1/2014 | | | | | |
| <702> | Single State-wide Residential Local Service Charge | | | | | |

[700] Price Offenngs including Voice Rate Data (700) Price Offenngs including Voice Rate (700) Price Offenngs including Voice Price Price

<703>

| State | Exchange (ILEC) | SAC (CETC) | Rate Type | Residential Local Service Rate | State Subscriber Line Charge | State Universal Service Fee | Mandatory Extended Area Service Charge | Total per line Rates and Fe |
|------------|-----------------|------------|-----------|--|------------------------------|-----------------------------|---|--|
| TX | All | | FR | 15.0 | 0.0 | 0.0 | 0.0 | 15.0 |
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| <010> | Study Area Code | 449012 |
|-------|---|---|
| <015> | Study Area Name | CUTTER COMMUNICATIONS INC DBA GCEC TECHNOLOGIES |
| <020> | Program Year | 2015 |
| <030> | Contact Name - Person USAC should contact regarding this data | Chris Offill |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | 9034827159 ext. |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | chris.offill@gcactelecom.com |

| State | Exchange (ILEC) | Residential Rate | State Regulated Fees | Total Rates and Fees | | Broadband Service -Upload Speed (Mbps) | Usage Allowance (GB) | Usage Allowance Action Taken When Limit Reached (select) |
|-------|-----------------|---------------------|--|-------------------------|-----|---|-------------------------|--|
| 1X | 0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | Other, CLEC not required to report broadband data |
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| STATE OF THE PARTY. | erating Companies L lection Form | | | | FCC Form 481 s OM8 Control No 3060-0986/OMB Control No. 3060-0819 July 2013 | |
|---------------------|---|--|---|-----|--|--|
| <010> | Study Area Code | • | 449012 | | .44 | |
| <015> | Study Area Name | | CUTTER COMMUNICATIONS INC DBA GCEC TECHNOLOGIES | | | |
| <020> | Program Year | | 2015 | | | |
| <030> | Contact Name - Person USAC should contact regarding this data | | Chris Offill | | | |
| <035> | Contact Telephone Number - Number of person identified in data line <030> | | 9034827159 ext. | | | |
| <039> | Contact Email Address - Email Address of person identified in data line <030> | | chris.offill@geectelecom.com | | | |
| <810> | Reporting Carrier | Cutter Communications, Inc. d/b/a GCEC Tel | ecos | | | |
| <811> | Holding Company | Grayson Collin Electric Cooperative | THE ALL WAS COME TO SHARE | | | |
| <812> | Operating Company | Cutter Communications, Inc. d/b/a GCEC Tel | ecom | | | |
| | Grayson Co | ollin Electric Cooperative | | | | |
| | * | Affiliates | | SAC | Doing Business As Company or Brand Designation | |
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Attachment File: 449012tx510.pdf

CUTTER COMMUNICATIONS, INC. – SAC 449012

FCC Form - Program Year 2015

Line 510

COMPLIANCE WITH SERVICE QUALITY STANDARDS AND CONSUMER PROTECTION RULES - 854,313(a)(5)

Cutter Communications, Inc. d/b/a GCEC Telecom ("GCEC" or "the Company") complies with all applicable service quality standards and consumer protection rules as required by the Public Utility Commission of Texas ("PUC") and the Federal Communications Commission ("FCC").

The rates, terms and conditions under which the Company operates are identified in its Local Exchange Tariff, which is approved by the PUC. The Company's tariff contains provisions regarding its customer service and protection practices, including resolving customer disputes, applying for, refusing, disconnection and cancellation of service. Rates and terms of service are disclosed to customers upon application for service as part of a packet of information for new customers.

Service quality standards are established by the PUC and GCEC consistently meets or exceeds those requirements. However, as a competitive local exchange carrier ("CLEC") the company is not required to submit quality of service reports to the PUC.

The protection of its customers' privacy and information is a constant part of GCEC's quality of service. The Company has a policy and operating procedures that comply with the FCC's Customer Proprietary Network Information ("CPNI") rules (47 C.F.R 64.2001 – 64.2011). Certification of GCEC's compliance with the FCC's CPNI rules is filed with the FCC annually.

Attachment File: 449012tx610.pdf

CUTTER COMMUNICATIONS, INC. - SAC 449012

FCC Form 481 - Program Year 2015

Line 610

ABILITY TO FUNCTION IN EMERGENCY SITUATIONS - 854,313(a)(6)

Cutter Communications, Inc. d/b/a GCEC Telecom ("GCEC" or "the Company") is capable of functioning in emergency situations. GCEC has a reasonable amount of back-up power to ensure functionality without a commercial external power source. The Company has a permanently installed standby power generator at its host switching office and remote switching locations have a minimum of eight (8) hours of backup battery capacity. These remote sites are also equipped to accept portable emergency power if necessary. The Company's network is capable of managing traffic spikes resulting from emergency conditions.

Attachment File: 449012tx1010.pdf

CUTTER COMMUNICATIONS, INC. - SAC 449012

FCC Form 481 - Program Year 2014

Line 1010

DESCRIPTION OF VOICE SERVICES RATE COMPARABILITY - \$54,313(a)(10)

Cutter Communications, Inc. d/b/a GCEC Telecom ("GCEC" or "the Company") is a CLEC. As shown by GCEC's response to 700 (Attachment File: 449012tx700.pdf), GCEC's total residential voice service rate is \$15.00. When all state and federal mandatory charges are added to GCEC's residential voice service rate the total rate is below the \$46.96 Rate Comparability Benchmark set by the Bureau.

Local Exchange Services Tariff

SECTION 5

1st Revised Page 18 Replaces Original Page 18

GENERAL RULES AND REGULATIONS

V. CUSTOMER RELATIONS, (Cont'd)

G. Lifeline Program

- Lifeline Service is a retail local service offering sponsored by the FCC and available to qualifying low-income consumers in accordance with the Public Utility Commission of Texas' Low-Income Discount Procedural Guide (Guide) and the Low-Income Discount Administrator (LIDA).
- Consumers qualifying for Lifeline Service are offered the services or functionalities enumerated in 47 Code of Federal Regulations §54.101(a)(1)-(8) (relating to Supported Services for Rural, Insular and High Cost Areas).
- The Company shall offer Toll Denial at no charge to all qualifying lowincome consumers at the time such consumers subscribe to Lifeline Service. If the consumer elects to receive Toll Denial, that service shall become part of the consumer's Lifeline Service.
- A customer otherwise eligible to receive the Lifeline Service shall not be prohibited from obtaining and using telecommunication equipment and services designed to aid such customer in utilizing qualifying telecommunication services.
- 5. Lifeline Service rate reductions do not apply to long distance service, 976 and other information provider services, or any other optional services or functionalities (i.e., custom calling features, construction, etc.) which may or may not be tariffed. Customers may obtain such services, where available, at their discretion, although the Lifeline Service reduction does not apply.
- The Lifeline Service rate reductions do not apply to service connection charges, except that customers eligible for the Link Up America program will receive a reduction in applicable service connection charges, as set forth in this tariff.
- Lifeline Service will not be available on a retroactive basis.

8.

Issued: July 27, 2012

(D)

(D)

1st Revised Page 19 Replaces Original Page 19

GENERAL RULES AND REGULATIONS

V. CUSTOMER RELATIONS, (Cont'd)

G. Lifeline Program (Cont'd)

- 9. Eligibility Requirements
 - a. The discounted service will be provided for one (1) residential telephone line per household, at the subscriber's principal place of residence.
 - b. The service must be provided in the eligible consumer's name.
 - c. Each participating telecommunications carrier shall provide Lifeline Service as provided by this section. A customer with an income at or below 150% of the federal poverty guidelines be an eligible resident of Tribal lands, or participate in, or have a person or child who resides in the customer household who participates in a program identified in Chapter 47 of the Code of Federal Regulations § 54.409 and in P.U.C. Substantive Rule 26.412 regarding consumer qualification for Lifeline. service.

d. Procedures for Establishing Lifeline Discounts

1) Consumers within the Company's service area are identified as eligible for Lifeline Service by the Texas Department of Human Services (TDHS) through the automatic enrollment process of the LIDA and in accordance with Commission Substantive Rule 26.412. The Company shall provide Lifeline Service discounts within 30 days of notice by LIDA, unless the Company receives a customer request to be excluded from such discounts.



(T)(D)

(T)(D)

Issued: July 27, 2012

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GENERAL RULES AND REGULATIONS

- V. CUSTOMER RELATIONS, (Cont'd)
 - G. Lifeline Program (Cont'd)
 - 9. Eligibility Requirements (Cont'd)
 - d. Procedures for Establishing Lifeline Discounts (Cont'd)
 - LIDA shall provide the Company with an initial list of consumers eligible for Lifeline Service and shall provide an updated list to the Company on a periodic basis.
 - Consumers who do not participate in one of the designated qualifying programs may instead be eligible for Lifeline Service by having an income at or below 150% of the federal poverty guidelines. Consumers who meet this qualification may establish self-enrollment eligibility by providing information to LIDA and receive Lifeline Service discounts within 30 days. Self-enrolled customers establish eligibility every seven months with LIDA, who may require the customer to renew proof of income within 60 days of eligibility terminating.
 - 4) Consumers who believe their self-enrollment eligibility was denied in error by LIDA may request a review by LIDA and pursue a Commission hearing or complaint as necessary.

5) (D)

Issued: July 27, 2012

SECTION 5 1st Revised Page 22 Replaces Original Page 22

GENERAL RULES AND REGULATIONS

- V. CUSTOMER RELATIONS, (Cont'd)
 - G. Lifeline Program (Cont'd)
 - 10. Service Discounts
 - a. <u>Lifeline support amounts</u>. Lifeline support amounts per low-income customer shall be provided to participating telecommunications carriers pursuant to Title 47, Code of Federal Regulations, §54.403 (relating to Lifeline Support Amount) and according to any applicable provisions of the Guide. Tribal Land discounts will be provided pursuant to Title 47, code of Federal Regulations, §54.403.

<u>Lifeline Service Discounts</u>. The Company shall grant qualifying low-income consumers support of \$9.25 per month or equal to the support amount as directed by the Federal Communications Commission in Chapter 47 of the Code of Federal Regulations regarding Lifeline Support.

Additional state reduction. A participating telecommunications carrier shall give a qualifying low-income customer an additional state-approved reduction of up to a maximum of \$3.50 in the monthly amount of intrastate charges.

(T)(D)

(T)(D)

Issued: July 27, 2012

GCEC Telecom

Local Exchange Services Tariff

SECTION 5

1st Revised Page 23 Replaces Original Page 23

GENERAL RULES AND REGULATIONS

V. CUSTOMER RELATIONS, (Cont'd)

G. Lifeline Program (Cont'd)

11. Service Charges
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- b) Service charges apply when:
 - At the time Lifeline Service billing is initiated, where existing eligible residential local exchange access service customers request additional features, such as special or custom calling features.
 - A customer receiving Lifeline Service voluntarily elects to convert to telephone service arrangements, which preclude Lifeline Service eligibility.
 - New residential applicants (those without existing local exchange access service) eligible for the Lifeline Program will be subject to applicable service charges.

(D) (D)

 Any subsequent moves or changes after the initial connection to Lifeline Service will be subject to applicable service charges.

(D) (D)

12. Payments and Disconnection of Service

- The Company may not disconnect Lifeline Service for nonpayment of toll charges.
- A Lifeline customer is required to adhere to the same bill payment policies applicable to all of the Company's customers.

Issued: July 27, 2012

GCEC Telecom

Local Exchange Services Tariff

SECTION 5

1st Revised Page 24 Replaces Original Page 24

GENERAL RULES AND REGULATIONS

V. CUSTOMER RELATIONS, (Cont'd)

H. RESERVED FOR FUTURE USE

(D)

(D)

Issued: July 27, 2012

David McGinnis 600 Highway 75 North

Van Alstyne, TX 75495

GENERAL RULES AND REGULATIONS

VIII. SURCHARGES, FEES, AND TAXES (Cont'd)

C. 911 EMERGENCY COMMUNICATIONS CHARGES

Texas imposes three separate 911 emergency communications charges; the 911 Emergency Service Fee, the 911 Wireless Emergency Service Fee, and the 911 Equalization Surcharge. Revenue from these charges is used by regional planning commissions, emergency communication districts, and poison control centers to establish statewide emergency 911 service.

The 911 Service Fees are collected by telecommunications service providers, as defined in CSRC Rule 255.1, Rule 255.4 and the Texas Health and Safety Code, Section 771.0711. Rates assessed are in compliance with state law.

D. STATE AND LOCAL TAXES

The Company will assess all applicable State and Local taxes on telecommunications services, as required by law. Rates are determined by the state, and applicable local jurisdictions.

E. FEDERAL EXCISE TAX

The Company will assess the 3% Federal Excise Tax on telecommunications services, as required by law.

F. RESERVED FOR FUTURE USE

(D)

(D)